As cancer survivorship increases, long-term health outcomes have become an important public health issue. Studies show cancer survivors engaging in evidence-based wellness behaviors have improved quality of life, physical function, and reduced fatigue. Rural survivors typically experience limited/no availability or access to wellness programs. The Little Red Door (LRD) collaborated with National Association of Chronic Disease Directors, (NACDD), and Centers for Disease Control (CDC) to implement a multi-component wellness program for cancer survivors in rural Indiana.

About Little Red Door’s Rural Indiana Project

- Madison and Randolph Counties chosen to conduct project.
- Madison County cancer incidence rate is 469 cases per 100,000 people
- Randolph County cancer incidence rate is 482 cases per 100,000 people
- About 1100 individuals are diagnosed with cancer in these adjacent counties
- Limited cancer survivorship programming was available in Madison county; no programming in Randolph county
- Two health systems, located in both communities treat most individuals diagnosed with cancer

Little Red Door doubled the number of participants in survivorship wellness programs by adapting evidence-informed wellness programs to virtual delivery.
Using the Program Logic Model and Guidance outlined in the “Guide”*

**Developing Cancer Survivor Wellness Programs**, the Little Red Door Cancer Agency (LRD) experienced several successes through innovation:

**Identify & Engage Partners**

The LRD Cancer Agency completed an extensive 6 county needs assessment in east central Indiana, revealing the lack of cancer survivorship services available. LRD, headquartered in Indianapolis addressed the barrier of not having a physical presence in the selected rural communities by engaging partner members of the state’s cancer coalition:

- two health systems provided access to cancer survivors for assessing needs and wellness programs recruitment. Participants self-identified after being referred to LRD by their oncology providers and (to a lesser extent) by community partners.
- a YMCA in a neighboring community delivered wellness interventions outside the membership facility, in locations where cancer survivors felt comfortable.
- state cancer program staff were champions for connecting LRD to survivorship partners in rural communities.

**Develop and implement a Wellness Program**

In addition to typical barriers to participating in wellness programs, such as not feeling well enough to add another activity to their days, rural cancer survivors frequently had to travel great distances to access services. The rural challenges were met by:

- developing or adding virtual, online offerings allowed LRD to reach people in rural areas with less access to survivorship programming and simultaneously cut the costs that accompany in-person classes.
- working with partners to offer programs outside of the hospital setting, which patients associated with painful treatment, rather than wellness.

**Conduct Program Monitoring and Evaluation**

While evaluation of programs delivered online were not yet well developed, the LRD and its partners were encouraged by results experienced to date:

- on-line classes, while difficult to collect individual data, resulted in a doubling of attendees compared to the in-person classes.
- Program costs reduced by half when delivered online and eliminated instructor travel time.
- People who attended classes in person were not necessarily the same as the people who attended virtually.

Engaging the ongoing State Cancer Coalition partnership has been key to their ability to sustain and expand program options beyond the length of the grant funding period. “Another rural community has already requested assistance with replicating project in their community.” - community based organization program director